

Attachment F

FOCUS AREA F: RISK COMMUNICATION AND HEALTH INFORMATION DISSEMINATION (PUBLIC INFORMATION AND COMMUNICATION)

Focus Area F includes one Critical Capacity:

- A. Public Health Risk Communication: Assessment, Planning, and Community Access

Focus Area F includes one Enhanced Capacity:

- B. Development, Testing, and Dissemination of Effective Public Health Communication, Concepts, Messages, and Strategies

Each Focus Area includes **Critical Capacities**, which are the core expertise and infrastructure that should be implemented as soon as possible to enable a public health system to prepare for and respond to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. Some of the **Critical Capacities** include **Critical Benchmarks**, which recipients are required to complete prior to submission of the work plan (see Notice of Cooperative Agreement Award). Further, some **Critical Capacities** have associated with them **Activities That May be Considered**. Though not exhaustive, these lists provide examples of related activities that applicants may propose to develop to augment the relevant **Critical Capacity**.

For each **Critical Capacity**, the work plan must provide: (a) a brief description of the existing capacity in your jurisdiction, (b) an assessment of whether this capacity is adequate, and (c) where you judge the capacity inadequate, a proposal for effecting improvements during this budget period--including a timeline to guide implementation, measurable milestones to facilitate accountability, and a proposed budget. **This document should not exceed 5 pages.**

Some Focus Areas also include **Enhanced Capacities**, which are the additional expertise and infrastructure--i.e., over and beyond the **Critical Capacities**--to enable public health systems to have optimal capacities to respond to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. **Enhanced Capacities** should be addressed only after Critical Capacities have been achieved or are well along in development. Recipients are encouraged to choose among these suggested activities or propose other comparable ones.

For each **Enhanced Capacity** that the recipient chooses to address now, the work plan must include a brief proposal for effecting the intended enhancements during this budget period--including a timeline to guide implementation, measurable milestones to facilitate accountability, and a proposed budget. **This document is not to exceed 5 pages.**

Recipient Activities:

- A. **CRITICAL CAPACITY:** to provide needed health/risk

information to the public and key partners during a terrorism event by establishing critical baseline information about the current communication needs and barriers within individual communities, and identifying effective channels of communication for reaching the general public and special populations during public health threats and emergencies.

1. Develop an interim plan for risk communication and information dissemination to educate the public regarding exposure risks and effective public response. **(LINK WITH FOCUS AREA A)**
(CRITICAL BENCHMARK #13)
2. Conduct a needs assessment to evaluate the communication and information needs for health and risk information for public health threats and emergencies.
3. Review appropriate risk communication strategies and resources from the private sector, the media, and federal emergency management sources, including the CDC Public Health Preparedness and Response Web site (see www.bt.cdc.gov), other national Web sites, state/local Health Alert Networks, online and hard-copy “bulletin boards,” hotlines and clearinghouses, and other tested communication strategies, and concepts. Develop a plan and implement effective channels of communication for reaching the general public and special populations during public health emergencies. (See Appendix 6, I.T. functions #7-9).
4. As part of the final plan, identify key public health spokespersons and ensure their competency, awareness, and ongoing training necessary to effectively communicate with the public and media to prepare for and respond to public health emergencies (especially in times of crisis).
5. **Activities that may be considered:**
 - a. Establish an emergency public information system, including call-down lists of public health contacts, backup personnel who can be activated to address communications, and information dissemination issues during an emergency.
 - b. Institute a regular testing program for routine and emergency communication channels and equipment, including unannounced drills and exercises.
 - c. Ensure access to key technical communication expertise—directly or through other organizations—including scientific, health, and risk communicators, health educators, technical information specialists,

scientific writers/editors, scientific illustrators, graphic specialists, Web specialists, and public inquiries specialists.

B. **ENHANCED CAPACITY:** to identify, develop, and pretest communication concepts, messages, and strategies to ensure that state and local public health agencies prepare in advance and produce effective and culturally appropriate public information for bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies.

1. Assess, with local public health agencies, existing standard policies, procedures, and legal authorities and agreements for conducting risk communication.
2. With local public health agencies, describe existing communication and contingency plans and establish pre-arranged channels for communication, including presentation to community partners, local medical and professional staff; links to peer communities; and journals, newsletters, and other publications.
3. Provide access to summaries of current investigations/issues and standard protocols for development, review, clearance and presentation of findings, and identify standard templates and expertise for translating scientific findings into practical guidelines.
4. With local public health agencies and other partners responding to a public health emergency, establish mechanisms for design, development, and dissemination of communication messages and materials.
5. With local public health agencies and other stakeholders, establish the capacity to conduct awareness and outreach campaigns, including town hall meetings, focus groups, and community outreach to civic organizations, schools, businesses, and special ethnic and cultural groups.
6. With local public health agencies, establish mechanisms for tracking and monitoring message dissemination and exposure, media coverage, audience reaction and feedback, and changing communication issues and priorities.
7. With local public health agencies, ensure that consistent and accurate information is disseminated, especially among adjacent state and local public health jurisdictions, and establish a formal evaluation of the impact of communication on public health practice, community behaviors, and on key policy decisions.
8. Ensure that the competencies and credentialing requirements for communications specialties are reviewed annually and that requirements for continuing education are met. Attention should be paid to the recruitment, training, and the proper career development of these personnel.

CDC Activities:

- A. Provide expertise, consultation, and technical assistance and training on all components of public information and communication.
- B. Facilitate the transfer of information via workshops, conferences, satellite broadcasts, and other means.
- C. Provide model communication plans, guidelines, templates, press kits, and other pre-tested communication resources for guidance, use, or customization by state and local public health officials.
- D. Partner in the conduct of formative research and evaluation of communication strategies and messages and serve as an information resource for findings from national and other studies.
- E. Provide updates on federal legislation, regulation, policies, and procedures impacting the use and release of information.
- F. Assist in the translation of materials to multiple languages and aid in assuring that materials culturally appropriate.
- G. Assist in the development and review of communication competencies for communication professionals and other staff, and provide training and education to build and certify competencies.
- H. **Provide communication specialists as members of multi-disciplinary response teams for public health threats and emergencies.**